U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number **U** - 303

## READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

,	
Name Ressie Smith	Name Utility Workers AFL-CIO, Local Union G-555
	Labor Organization File Number 011-837
P.O. Box, Bldg., Room No., if any Suite 11	P.O. Box, Building and Room Number, if any Suite 11
Street 7777 Exchange Street	Street 7777 Exchange Street
City Valley View	City Valley View
State Ohio ZIP Code + 4 44125	State Ohio ZIP Code + 4 44125
5. Position in labor organization.  Executive Secretary	
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests slons set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or omnotery value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
The state of the s	
P.O. Box, Bldg., Room No., if any	7 h Amount
P.O. Box, Bldg., Room No., if any	7.b. Amount.
	7.b. Amount.
	7.b. Amount.
Street	7.b. Amount.
Street	
Street City State ZIP Code + 4	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the
Street  City  State ZIP Code + 4  Sign:  15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the

Ressie Smith	110 Hallison V 11-83 /	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name		
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bidg., Room No., if any	b. Trust c. Employer	
Street		
Chy		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City	Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.	
State Ohio ZIP Code + 4		
	12.b. Amount.	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	r parts A and B above)	
(including trade name, if any).	Gift of six steaks	
Name Schwarzwald & McNair LLP		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any 616 Penton Media Building		
Street 1300 East Ninth Street		
City Cleveland		
State Ohio ZIP Code + 4 44114-1503		
13.b. Is the Business an Employer - ★ or Consultant ?	14.b. Amount of payment. Approx., \$80.00 - December 2004	